



To: Board of Public Works and Safety

From: David Payne, Purchasing Manager

Date: March 18, 2020

Re: Renewal of Contract – Reservoir Mowing

RECOMMENDATION OF CONTRACT RENEWAL

Recommendation is being made to renew the 2016 contract for Landscape Maintenance performed by Morrow's Lawn Service for calendar year 2020.

Morrow's Lawn Service has been performing this service since 2016 and has a good system in place to ensure safety is a priority during the mowing process. They have offered to extend the 2016 contract and to perform the same services at the same cost (2016 price) during 2020.



PURCHASING DEPARTMENT
20 N. 6th Street · Lafayette, IN 47901
(765) 807-1151

March 18, 2020

Board of Public Works and Safety
City of Lafayette
20 N. 6th Street
Lafayette, IN 47901

Re: 2020 Reservoir Mowing Contract Renewal, Morrow's Lawn Services

NOTICE OF AWARD

Recommendation has been made to accept the offer from Morrow's Lawn Services to again renew their contract from calendar year 2016 in its entirety for the calendar year 2020.

The Board of Public Works and Safety has motioned, seconded and passed this recommendation all on this 24th day of March, 2020.

Gary Henriott, President

Ron Shriner, Member

Cindy Murray, Member

Norm Childress, Member

Amy Moulton, Member

ATTEST:

Mindy Miller, 1st Deputy Clerk

Date

Morrows Lawn Services

214 S. 7th Street

Lafayette, IN. 47905

Phone (765) 532-1648

To whom it may concern:

Morrows Lawn Services will honor the 2016 pricing on Mowing for the 2020 season \$545.00 per mow for the Reservoir at Columbian Park.

Thank You for your Business

Morrows Lawn Care

James Morrow

OWNER 



CERTIFICATE OF INSURANCE

— THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY —

DATE ISSUED (MM/DD/YY)
2/28/20

Home Office • 100 Erie Insurance Place • Erie, Pennsylvania 16530 • 814.870.2000
Toll free 1.800.458.0811 • Fax 814.870.3126 • www.erieinsurance.com

NAME AND ADDRESS OF AGENCY BLEVINS INSURANCE AGENCY INC 803 S 18TH ST LAFAYETTE, IN 47905-1517 (765)446-8999	AGENT'S NO. FF1288	COMPANIES AFFORDING COVERAGE	
		Co.: C ERIE INSURANCE COMPANY Co.: D ERIE INSURANCE PROPERTY & CASUALTY COMPANY Co.: E ERIE INSURANCE EXCHANGE (Not Applicable) Erie Indemnity Co., Attorney-in-Fact In NY Co.: F ERIE INSURANCE COMPANY OF NEW YORK Co.: G FLAGSHIP CITY INSURANCE COMPANY	

NAME AND ADDRESS OF NAMED INSURED MORROWS LAWN SERVICE JAMES MORROW DBA 214 S 7TH STREET LAFAYETTE, IN 47901	This certificate is issued for information purposes only and confers no rights on the certificate holder. It does not affirmatively or negatively amend, extend, or otherwise alter the terms, exclusions and conditions of insurance coverage contained in the policy(ies) indicated below. The terms and conditions of the policy(ies) govern the insurance coverage as applied to any given situation. Limits shown may have been reduced by claims paid. This certificate of insurance does not constitute a contract between the issuing insurer(s), authorized representative or producer and the certificate holder.
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This is to certify that policies, as indicated by the Policy Number below, are in force for the Named Insured at the time that the Certificate is being issued.							
CD Add'l LTB Ins'd	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS		
E <input checked="" type="checkbox"/>	GENERAL LIABILITY <input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS MADE <input checked="" type="checkbox"/> OCCUR <input type="checkbox"/> <input type="checkbox"/> GEN'L AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PROJECT <input type="checkbox"/> LOC	Q25 2621165	1/26/20	1/26/21	EACH OCCURRENCE	\$	1,000,000
					FIRE DAMAGE (Any One Fire)	\$	1,000,000
					MED EXP (Any One Person)	\$	5,000
					PERSONAL & ADV. INJURY	\$	1,000,000
					GENERAL AGGREGATE	\$	2,000,000
					PRODUCTS-COMP/OP AGG	\$	2,000,000
E <input type="checkbox"/>	AUTOMOBILE LIABILITY <input checked="" type="checkbox"/> "ANY AUTO" (OWNED, HIRED, NON-OWNED) <input type="checkbox"/> OWNED <input type="checkbox"/> HIRED <input type="checkbox"/> NON-OWNED <input type="checkbox"/> GARAGE	Q01 2630718	1/26/20	1/26/21	BODILY INJURY (EACH PERSON)	\$	
					BODILY INJURY (EACH ACCIDENT)	\$	
					PROPERTY DAMAGE	\$	
					BODILY INJURY AND PROPERTY DAMAGE COMBINED	\$	1,000,000
E <input type="checkbox"/>	EXCESS LIABILITY <input checked="" type="checkbox"/> OCCURRENCE <input type="checkbox"/> RETENTION \$	Q25 2670244	1/26/20	1/26/21	EACH OCCURRENCE	\$	2,000,000
					AGGREGATE	\$	2,000,000
						\$	
						\$	
D	WORKERS COMPENSATION & EMPLOYERS LIABILITY	Q85 7600186	1/26/20	1/26/21	STATUTORY		
					BODILY INJURY BY	ACCIDENT	\$ 1,000,000 EACH ACCIDENT
						DISEASE	\$ 1,000,000 POLICY LIMIT
						DISEASE	\$ 1,000,000 EACH EMPLOYEE
	OTHER						

DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES/EXCLUSIONS ADDED BY ENDORSEMENT/SPECIAL PROVISIONS

CANCELLATION: SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

NAME AND ADDRESS OF CERTIFICATE HOLDER CITY OF LAFAYETTE 20 N 6TH STREET LAFAYETTE, IN 47904	AUTHORIZED REPRESENTATIVE <i>April Dill</i>
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